

**ARIZONA CORPORATION COMMISSION PIPELINE SAFETY
TO BE FILED NO SOONER THAN JANUARY 1st AND NO LATER THAN APRIL 15th**

**ANNUAL REPORT FOR CALENDAR YEAR _____
SMALL OPERATORS OF GAS DISTRIBUTION SYSTEM**

FACILITY INFORMATION

OPERATOR/OWNER

NAME OF FACILITY _____

NAME _____

ADDRESS OF FACILITY _____

ADDRESS _____

CITY _____

COUNTY _____

CITY _____

STATE _____

ZIP CODE _____

STATE _____

ZIP CODE _____

FACILITY E-MAIL ADDRESS _____

OPERATOR E-MAIL ADDRESS _____

AREA CODE _____

TELEPHONE _____

AREA CODE _____

TELEPHONE _____

FACILITY TYPE: MHP _____ APT/CONDO _____ SCHOOL _____ BUSINESS _____ # OF BLDG _____

SYSTEM INFORMATION

**FEET OF
PIPE**

FOR UNDERGROUND STEEL SYSTEMS

DATE OF LAST C/P CHECK IN _____

____ / ____ / ____

(If no tests were conducted, please write "None Conducted")

UNDERGROUND STEEL PIPE

ABOVEGROUND STEEL PIPE

UNDERGROUND PE PLASTIC PIPE

DATE OF LEAK SURVEY CONDUCTED

IN _____

____ / ____ / ____

(If no tests were conducted, please write "None Conducted")

UNDERGROUND PVC PLASTIC PIPE

**TOTAL LEAKS IN SYSTEM
DURING LAST CAL. YEAR _____**

TOTAL FEET OF PIPE IN SYSTEM

CAUSE:

CORROSION _____

THIRD PARTY DAMAGE _____

CONSTRUCTION DEFECT _____

MATERIAL DEFECT _____

OTHER _____

**NUMBER OF KNOWN LEAKS
AT END OF YEAR _____**

NOTE: (if you have any comments or concerns, please note in this box)

PREPARED BY (TYPE OR PRINT) _____

AREA CODE _____

TELEPHONE _____

NAME AND TITLE PERSON SIGNING _____

AUTHORIZED SIGNATURE _____

**MAIL TO: 2200 N. Central Ave., Suite #300, Phoenix, Arizona 85004
FAX TO: (602) 262-5620 – OR EMAIL TO: safety@azcc.gov**

WILL NOT
BE
DELIVERED
WITHOUT
PROPER
POSTAGE

**ARIZONA CORPORATION COMMISSION
OFFICE OF PIPELINE SAFETY – GAS SAFETY PROGRAM
2200 NORTH CENTRAL AVENUE, SUITE #300
PHOENIX, ARIZONA 85004**

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